

February 19, 2014

Montana Health Care Programs Notice

Hospital Outpatient

Effective January 1, 2014

Medicaid Outpatient Laboratory Billing

Beginning January 1, 2014, Medicare revised the use of type of bill (TOB) 13x and 14x, and Medicaid will follow suit per Administrative Rules of Montana (ARM).

Previously, bill type 13x was used for outpatient diagnostic testing services. Bill type 14x was used for laboratory tests performed on a laboratory specimen for a non-patient.

Under the new payment policy, laboratory tests that are packaged into Outpatient Prospective Payment System (OPPS) must be billed on a 13x claim with the primary service. A laboratory test that is not packaged should be billed on a 14x claim.

Type of Bill 14X, Outpatient Diagnostic Laboratory Services – This TOB should only be used for non-patient laboratory services. Services billed under TOB 14X are subject to the laboratory fee schedule rates. Laboratory tests not payable on the laboratory fee schedule will be based on OPPS current methodology. Laboratory tests may be billed on a 14x claim in the following situations:

1. Non-patient laboratory specimen tests; non-patient continues to be defined as a beneficiary that is neither an inpatient nor an outpatient of a hospital, but that has a specimen that is submitted for analysis to a hospital and the beneficiary is not physically present at the hospital;
2. Beginning in 2014, when the hospital only provides laboratory tests to the patient (directly or under arrangement) and the patient does not also receive other hospital outpatient services during that same encounter; and
3. Beginning in 2014, when the hospital provides a laboratory test (directly or under arrangement) during the same encounter as other hospital outpatient services that is clinically unrelated to the other hospital outpatient services, and the laboratory test is ordered by a different practitioner than the practitioner who ordered the other hospital outpatient services provided in the hospital outpatient setting.

Type of Bill 13X, Outpatient Hospital – This TOB is used for outpatient and ancillary services such as outpatient surgeries, consultations, therapy visits, or diagnostic tests rendered in the emergency room or other outpatient department or clinic as a result of an encounter at a facility.

In addition, laboratory tests for molecular pathology tests described by CPT codes 81200 through 81383, 81400 through 81408, and 81479 are not packaged in the OPPS and should be billed on TOB 13X.

Contact Information

If you have any questions, please contact Jennifer Rieden at 406-444-7018 or Jrieden@mt.gov.

For claims questions or additional information, contact Provider Relations at 1-800-624-3958 (toll-free, in/out of state) or 406-442-1837 (Helena) or via e-mail at MTPRHelpdesk@xerox.com.

Visit the Provider Information website at <http://medicaidprovider.hhs.mt.gov>.